



QUARTERLY STATEMENT

AS OF JUNE 30, 2019  
OF THE CONDITION AND AFFAIRS OF THE

Upper Peninsula Health Plan, LLC

NAIC Group Code	04734	(Current Period)	04734	(Prior Period)	NAIC Company Code	52615	Employer's ID Number	46-0927995
Organized under the Laws of	Michigan				State of Domicile or Port of Entry	Michigan		
Country of Domicile	United States							
Licensed as business type:	Life, Accident & Health [ ]		Property/Casualty [ ]		Hospital, Medical & Dental Service or Indemnity [ ]			
	Dental Service Corporation [ ]		Vision Service Corporation [ ]		Health Maintenance Organization [ X ]			
	Other [ ]				Is HMO Federally Qualified? Yes [ ] No [ X ]			
Incorporated/Organized	10/23/1997		Commenced Business		08/01/1998			
Statutory Home Office	853 W. Washington St.				Marquette, MI, US 49855			
	(Street and Number)				(City or Town, State, Country and Zip Code)			
Main Administrative Office	853 W. Washington St.		Marquette, MI, US 49855		906-225-7500			
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)			
Mail Address	853 W. Washington St.		Marquette, MI, US 49855					
	(Street and Number or P.O. Box)		(City or Town, State, Country and Zip Code)					
Primary Location of Books and Records	853 W. Washington St.		Marquette, MI, US 49855		906-225-7500			
	(Street and Number)		(City or Town, State, Country and Zip Code)		(Area Code) (Telephone Number)			
Internet Web Site Address	uphp.com							
Statutory Statement Contact	Leslie Ellen Luke		906-227-5696					
	(Name)		(Area Code) (Telephone Number) (Extension)					
	lluke@uphp.com		906-225-8687					
	(E-Mail Address)		(FAX Number)					

OFFICERS

Name	Title	Name	Title
Melissa Ann Holmquist	President	Leslie Ellen Luke	Treasurer
Johanna Marie Novak	Secretary	Melanie Lyn Bicigo	Chief Operating Officer

OTHER OFFICERS

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DIRECTORS OR TRUSTEES

Michelle Marie Tavernier	David Barry Jahn	Margie Mae Hale #	Donald Michael Pawelski
Robert Conrad Deese	Robert Thomas Crumb #	Robert Vincent Vairo	Scott Frederick Pillion
Gerald Cleadis Dooley #			

State of Michigan

County of Marquette

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The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Melissa Ann Holmquist President	Leslie Ellen Luke Treasurer	Johanna Marie Novak Secretary
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a. Is this an original filing? Yes [ X ] No [ ]

- b. If no:
1. State the amendment number
  2. Date filed
  3. Number of pages attached

Subscribed and sworn to before me this  
12th day of August, 2019

Tanya M. Jennings, Director of Human Resources  
October 11, 2019

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

ASSETS

	Current Statement Date			4  December 31 Prior Year Net Admitted Assets
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	32,558,227		32,558,227	21,647,349
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....	11,506,883		11,506,883	11,694,467
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ .....9,137,022 ), cash equivalents (\$ .....26,402,544 ) and short-term investments (\$ .....4,988,767 ) .....	40,528,332		40,528,332	40,303,698
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....	0		0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....	25,915		25,915	1,122
10. Securities lending reinvested collateral assets .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	84,619,357	0	84,619,357	73,646,636
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	279,381		279,381	207,661
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	3,662,906		3,662,906	30,140,507
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
15.3 Accrued retrospective premiums (\$ .....232,483 ) and contracts subject to redetermination (\$ ..... ) .....	232,483		232,483	3,692,426
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....	18,040,127		18,040,127	175,096
18.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
18.2 Net deferred tax asset .....			0	0
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	292,097	17,501	274,596	322,791
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	407,496	407,496	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	4,440		4,440	4,923
24. Health care (\$ ..... ) and other amounts receivable .....	2,384,331	2,384,331	0	0
25. Aggregate write-ins for other-than-invested assets .....	852,374	852,374	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	110,774,992	3,661,702	107,113,290	108,190,040
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	110,774,992	3,661,702	107,113,290	108,190,040
DETAILS OF WRITE-INS				
1101. ....			0	0
1102. ....			0	0
1103. ....			0	0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....	0	0	0	0
2501. Prepays .....	807,801	807,801	0	0
2502. Vehicles .....	44,573	44,573	0	0
2503. Other Receivables .....			0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	852,374	852,374	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....424,727 reinsurance ceded).....	25,966,210		25,966,210	23,413,941
2. Accrued medical incentive pool and bonus amounts .....			0	0
3. Unpaid claims adjustment expenses .....	262,265		262,265	219,000
4. Aggregate health policy reserves including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act .....			0	0
5. Aggregate life policy reserves .....			0	0
6. Property/casualty unearned premium reserve .....			0	0
7. Aggregate health claim reserves .....			0	0
8. Premiums received in advance .....	6,017		6,017	5,641
9. General expenses due or accrued .....	2,409,578		2,409,578	1,297,503
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....			0	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable .....			0	0
12. Amounts withheld or retained for the account of others .....	126,512		126,512	452,686
13. Remittances and items not allocated .....			0	0
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....			0	0
15. Amounts due to parent, subsidiaries and affiliates .....	891,507		891,507	68,628
16. Derivatives.....			0	0
17. Payable for securities .....			0	0
18. Payable for securities lending .....			0	0
19. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers, \$ ..... unauthorized reinsurers and \$ ..... certified reinsurers) .....			0	0
20. Reinsurance in unauthorized and certified (\$ ..... ) companies .....			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....			0	0
22. Liability for amounts held under uninsured plans .....	19,558,556		19,558,556	26,986,785
23. Aggregate write-ins for other liabilities (including \$ ..... current) .....	0	0	0	0
24. Total liabilities (Lines 1 to 23).....	49,220,645	0	49,220,645	52,444,184
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	0
26. Common capital stock .....	XXX	XXX		0
27. Preferred capital stock .....	XXX	XXX		0
28. Gross paid in and contributed surplus .....	XXX	XXX	3,427,727	3,427,727
29. Surplus notes .....	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	54,464,918	52,318,129
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... ) .....	XXX	XXX		0
32.2 ..... shares preferred (value included in Line 27 \$ ..... ) .....	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	57,892,645	55,745,856
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	107,113,290	108,190,040
DETAILS OF WRITE-INS				
2301. ....			0	0
2302. ....			0	0
2303. ....			0	0
2398. Summary of remaining write-ins for Line 23 from overflow page .....	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
2501. ACA Tax.....	XXX	XXX		0
2502. ....	XXX	XXX		0
2503. ....	XXX	XXX		0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001. ....	XXX	XXX		0
3002. ....	XXX	XXX		0
3003. ....	XXX	XXX		0
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	297,117	296,748	590,677
2. Net premium income (including \$ non-health premium income).....	XXX	126,497,723	124,837,150	250,893,320
3. Change in unearned premium reserves and reserve for rate credits .....	XXX		0	0
4. Fee-for-service (net of \$ medical expenses) .....	XXX		0	0
5. Risk revenue .....	XXX		0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	45,912	2,042,842	3,459,575
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	39,889
8. Total revenues (Lines 2 to 7) .....	XXX	126,543,635	126,879,992	254,392,784
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		75,906,250	78,346,057	159,954,932
10. Other professional services .....		11,392,453	10,629,401	21,590,523
11. Outside referrals .....		0	0	0
12. Emergency room and out-of-area .....		3,658,064	4,387,546	1,664,172
13. Prescription drugs .....		18,144,131	20,841,759	40,329,424
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....			0	0
16. Subtotal (Lines 9 to 15) .....	0	109,100,898	114,204,763	223,539,051
<b>Less:</b>				
17. Net reinsurance recoveries .....			0	1,090,346
18. Total hospital and medical (Lines 16 minus 17) .....	0	109,100,898	114,204,763	222,448,705
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$ 1,572,994 cost containment expenses.....		2,516,114	2,241,666	5,390,585
21. General administrative expenses.....		6,345,061	9,106,307	17,002,586
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....			0	0
23. Total underwriting deductions (Lines 18 through 22) .....	0	117,962,073	125,552,736	244,841,876
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	8,581,562	1,327,256	9,550,908
25. Net investment income earned .....		907,656	353,540	1,317,224
26. Net realized capital gains (losses) less capital gains tax of \$ .....			0	0
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	907,656	353,540	1,317,224
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ )] .....			0	0
29. Aggregate write-ins for other income or expenses .....	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	9,489,218	1,680,796	10,868,132
31. Federal and foreign income taxes incurred .....	XXX		0	0
32. Net income (loss) (Lines 30 minus 31) .....	XXX	9,489,218	1,680,796	10,868,132
<b>DETAILS OF WRITE-INS</b>				
0601. Miscellaneous Revenue.....	XXX	45,912	2,042,842	3,459,575
0602. ....	XXX		0	0
0603. ....	XXX		0	0
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX	45,912	2,042,842	3,459,575
0701. Gain/Loss on Asset disposal.....	XXX		0	(52,301)
0702. Tiff Revenue.....	XXX		0	92,190
0703. ....	XXX		0	0
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0	39,889
1401. ....			0	0
1402. ....			0	0
1403. ....			0	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	0	0	0	0
2901. ....			0	0
2902. ....			0	0
2903. ....			0	0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
<b>CAPITAL &amp; SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	55,745,856	55,151,825	55,151,825
34. Net income or (loss) from Line 32 .....	9,489,218	1,680,796	10,868,132
35. Change in valuation basis of aggregate policy and claim reserves .....		0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....		0	0
37. Change in net unrealized foreign exchange capital gain or (loss) .....		0	0
38. Change in net deferred income tax .....		0	0
39. Change in nonadmitted assets .....	157,571	(1,349,504)	(493,937)
40. Change in unauthorized and certified reinsurance .....	0	0	0
41. Change in treasury stock .....	0	0	0
42. Change in surplus notes .....	0	0	0
43. Cumulative effect of changes in accounting principles .....		0	0
44. Capital Changes:			
44.1 Paid in .....		0	0
44.2 Transferred from surplus (Stock Dividend) .....		0	0
44.3 Transferred to surplus .....		0	0
45. Surplus adjustments:			
45.1 Paid in .....		0	(155,143)
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....		0	0
46. Dividends to stockholders .....		0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	(7,500,000)	(7,500,000)	(9,625,021)
48. Net change in capital and surplus (Lines 34 to 47) .....	2,146,789	(7,168,708)	.594,031
49. Capital and surplus end of reporting period (Line 33 plus 48)	57,892,645	47,983,117	55,745,856
<b>DETAILS OF WRITE-INS</b>			
4701. Distribution of Equity.....	(7,500,000)	(7,500,000)	(7,500,000)
4702. Repurchase.....		0	(2,125,021)
4703. ....		0	0
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	(7,500,000)	(7,500,000)	(9,625,021)

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	156,435,643	135,509,153	227,867,082
2. Net investment income .....	857,061	359,929	1,671,404
3. Miscellaneous income .....	45,912	2,042,842	3,499,464
4. Total (Lines 1 to 3) .....	157,338,616	137,911,924	233,037,950
5. Benefit and loss related payments .....	106,548,629	122,817,110	234,753,807
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	32,999,095	2,448,471	(2,741,631)
8. Dividends paid to policyholders .....		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses).....	0	0	0
10. Total (Lines 5 through 9) .....	139,547,724	125,265,581	232,012,176
11. Net cash from operations (Line 4 minus Line 10) .....	17,790,892	12,646,343	1,025,774
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	3,450,000	5,182,000	5,182,000
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	226,534	4,351	0
12.7 Miscellaneous proceeds .....	187,584	187,301	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	3,864,118	5,373,652	5,182,000
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	14,382,003	7,662,848	7,662,848
13.2 Stocks .....	0	0	0
13.3 Mortgage loans .....	0	0	0
13.4 Real estate .....	0	0	21,993
13.5 Other invested assets .....	0	0	0
13.6 Miscellaneous applications .....	251,327	10,243	1,123
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	14,633,330	7,673,091	7,685,964
14. Net increase (or decrease) in contract loans and premium notes .....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(10,769,212)	(2,299,439)	(2,503,964)
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	(155,143)
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....		0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied).....	(6,797,046)	(8,351,627)	(9,440,431)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(6,797,046)	(8,351,627)	(9,595,574)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	224,634	1,995,277	(11,073,764)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	40,303,698	51,377,462	51,377,462
19.2 End of period (Line 18 plus Line 19.1) .....	40,528,332	53,372,739	40,303,698

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....	48,878	.0	.0	.0	.0	.0	.0	4,771	44,107	.0
2. First Quarter .....	49,835	.0	.0	.0	.0	.0	.0	4,609	45,226	.0
3. Second Quarter .....	49,191	.0	.0	.0	.0	.0	.0	4,816	44,375	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6. Current Year Member Months	297,117							28,009	269,108	
Total Member Ambulatory Encounters for Period:										
7. Physician .....	157,152							23,207	133,945	
8. Non-Physician .....	133,956							23,179	110,777	
9. Total	291,108	0	0	0	0	0	0	46,386	244,722	0
10. Hospital Patient Days Incurred	9,059							2,316	6,743	
11. Number of Inpatient Admissions	2,171							495	1,676	
12. Health Premiums Written (a).....	126,777,697							49,265,341	77,512,356	
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	126,777,697							49,265,341	77,512,356	
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	106,503,082							50,343,720	56,159,362	
18. Amount Incurred for Provision of Health Care Services	109,380,874							46,418,238	62,962,636	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 30,049,438

## CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

[illegible]



UNDERWRITING AND INVESTMENT EXHIBIT  
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5  Claims Incurred in Prior Years (Columns 1 + 3)	6  Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1  On Claims Incurred Prior to January 1 of Current Year	2  On Claims Incurred During the Year	3  On Claims Unpaid Dec. 31 of Prior Year	4  On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....					.....0	.....0
2. Medicare Supplement .....					.....0	.....0
3. Dental only .....					.....0	.....0
4. Vision only .....					.....0	.....0
5. Federal Employees Health Benefits Plan .....					.....0	.....0
6. Title XVIII - Medicare .....	.....9,600,578	.....40,687,711	.....2,682,538	.....10,428,937	.....12,283,116	.....11,478,234
7. Title XIX - Medicaid .....	.....10,490,841	.....45,443,977	.....2,112,685	.....10,742,050	.....12,603,526	.....11,935,707
8. Other health .....					.....0	.....0
9. Health subtotal (Lines 1 to 8).....	.....20,091,419	.....86,131,688	.....4,795,223	.....21,170,987	.....24,886,642	.....23,413,941
10. Health care receivables (a) .....				.....2,384,331	.....0	.....2,709,854
11. Other non-health .....					.....0	.....0
12. Medical incentive pools and bonus amounts .....					.....0	.....0
13. Totals (Lines 9-10+11+12)	20,091,419	86,131,688	4,795,223	18,786,656	24,886,642	20,704,087

(a) Excludes \$ ..... loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies and Going Concern

A) Accounting Practices

The accompanying statutory financial statements of Upper Peninsula Health Plan, LLC (the “Company”) have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services (“DIFS”). DIFS recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners’ (“NAIC”) Accounting Practices and Procedures Manual (“NAIC SAP”).

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan is shown below:

		SSAP#	F/S Page	F/S Line	2019	2018
<u>NET INCOME</u>						
(1)	Upper Peninsula Health Plan, LLC state basis (Page 4, Line 32, Columns 2 & 3)				\$ 9,489,218	\$ 10,868,132
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:	N/A				
(201)	e.g., Depreciation of fixed assets					
(299)	Total	N/A				
(3)	State Permitted Practices that increase/(decrease) NAIC SAP:	N/A				
(301)	e.g., Depreciation, home office property					
(399)	Total	N/A				
(4)	NAIC SAP (1-2-3 = 4)				\$ 9,489,218	\$ 10,868,132
<u>SURPLUS</u>						
(5)	Upper Peninsula Health Plan, LLC state Basis (Page 3, Line 33, Columns 3 & 4)				\$ 57,892,647	\$ 55,745,856
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:	N/A				
(601)	e.g., Goodwill, net; Fixed Assets, net					
(699)	Total	N/A				
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:	N/A				
(701)	e.g., Home office property					
(799)	Total	N/A				
(8)	NAIC SAP (5-6-7 = 8)				\$ 57,892,647	\$ 55,745,856

B) Use of Estimates in the Preparation of the Financial Statements

No material change.

C) Accounting Policy

- (2) Bonds, Mandatory Convertible Securities & SVO-Identified investments – The Company does not have any mandatory convertible securities or SVO identified investments.
- (6) Loan-backed securities – The Company does not own loan backed securities.

D) **Going Concern** – There are no conditions or events that would prevent the Company to continue as a going concern.

Note 2 - Accounting Changes and Corrections of Errors

As a result of our 2018 year-end audit, it was discovered there were supplemental payments that were not accrued as of December 31, 2018. We corrected the issue and will be restating our 2018 annual statement. This change increased our total assets and liabilities by \$10.5 million. There was no change to net income since the expense and revenue are reported net under general administrative expenses.

Note 3 - Business Combinations and Goodwill

No material change.

Note 4 - Discontinued Operations

No material change.

Note 5 - Investments

- D. Loan-Backed Securities – NONE
- E. Repurchase Agreements and/or Securities Lending Transactions – NONE
- (3)b. Collateral - NONE
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - NONE
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – NONE
- H. Repurchase Agreements Transactions Accounted for as a Sale – NONE

NOTES TO FINANCIAL STATEMENTS

- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - NONE
- J. Real Estate - NONE
- M. Working Capital Finance Investments – NONE
  - (2) Book/adjusted carrying value - NONE
  - (3) Events of default - NONE

N. Offsetting and Netting of Assets and Liabilities – NONE

**Note 6 - Joint Ventures, Partnerships, and Limited Liability Companies**

NONE

**Note 7 – Investment Income**

No material change.

**Note 8 - Derivative Instruments**

H. NONE

**Note 9 - Income Taxes**

NONE

**Note 10-Information Concerning Parent, Subsidiaries, and Affiliates**

No material change.

**Note 11-Debt**

B. FHLB (Federal Home Loan Bank) Agreements: Not Applicable

**Note 12-Retirement Plans, Deferred Compensation, Postemployment Benefits & Compensated Absences, and other Postretirement Benefit Plans**

A. (4) Defined Benefit Plan Net Periodic Benefit Cost: Not Applicable

**Note 13-Capital, Surplus, Shareholder’s Dividend Restrictions and Quasi-Reorganizations**

NONE

**Note 14-Contingencies**

NONE

**Note 15-Leases**

NONE

**Note 16-Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

NONE

**Note 17-Sale, Transfer, and Servicing of Financial Assets and Extinguishments of Liabilities**

- B. Transfer and Servicing of Financial Assets - NONE
  - (2) Servicing assets and liabilities – NONE
  - (4) Securitizations, asset-backed financing arrangements - NONE
- C. Wash Sales - NONE

**Note 18-Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans**

- A. The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows at the end of the 1st quarter of 2019.

NOTES TO FINANCIAL STATEMENTS

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a.	Net reimbursement for administrative expenses ( including administrative fees) in excess of actual expenses	\$ 61,324	\$ -	\$ 61,324
b.	Total net other income or expenses (including interest paid to or received from plans)	\$ -	\$ -	\$ -
c.	Net gain or (loss) from operations	\$ 61,324	\$ -	\$ 61,324
d.	Total claims payment volume	\$ 35,624,559	\$ -	\$ 35,624,559

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

NONE

Note 20 – Fair Value Measurements

In general, the Level 1 fair values are established from quoted (unadjusted) market prices in active markets for identical assets and liabilities that the Company has the ability to access.

A. Fair Value at Reporting Date

1. Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset	Total
a. Assets at fair value					
Cash (E-1)					
Open Depositories	0.00	0.00	0.00	0.00	0.00
Total Cash (E-1)	0.00	0.00	0.00	0.00	0.00
Long Term (D-1)					
Indust. & Misc.	0.00	0.00	0.00	250,000.00	250,000.00
Total Long Term (D-1)	0.00	0.00	0.00	250,000.00	250,000.00
Separate account assets	---	---	---	---	---
Total assets at fair value	0.00	0.00	0.00	250,000.00	250,000.00
b. Liabilities at fair value					
Derivative liabilities	---	---	---	---	---
Total Liabilities at fair value	---	---	---	---	---

2. Fair Value Measurements in Level 3 – NONE

3. The Company’s policy for determining transfers between levels are recognized and determined at the end of the reporting period.

4. As of June 30, 2019, the reported fair value of the reporting entity’s investments in Level 3, NAIC designated 6, residential mortgage-backed securities was \$0.

5. Derivative assets and liabilities - NONE

B. Fair value information disclosed under SSAP No. 100 combined with fair value information under other accounting pronouncements – NONE

C. Aggregate Fair Value of all Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable Carrying Value
Bonds	\$ 32,659,349	\$ 32,558,227	\$ 32,558,227			\$ -
Short Term Investments	\$ 4,992,190	\$ 4,988,766	\$ 4,988,766			
Cash Equivalents	\$ 26,402,544	\$ 26,402,544	\$ 26,402,544			
Total	\$ 64,054,083	\$ 63,949,537	\$ 63,949,537	\$ -	\$ -	\$ -

D. Not practicable to estimate fair value - NONE

Note 21 – Other Items

NOTES TO FINANCIAL STATEMENTS

No material change

Note 22-Events Subsequent

- Type 1 – Recognized subsequent events – Not Applicable
- Type 2 – No material change

Note 23-Reinsurance

No material change.

Note 24-Retrospectively Rated Contracts & Contracts Subject to Redetermination

- E. Risk Sharing Provisions of the Affordable Care Act: NONE

Note 25-Change in Incurred Claims and Claim Adjustment Expense

- A. Reserves as of December 31, 2018 were \$23,413,941 for unpaid claims and \$219,000 for unpaid claims adjustment expenses. As of June 30, 2019 \$20,091,418 has been paid for incurred claims and attributable to insured events of prior years. Claims expense reserves remaining for prior years are now \$4,795,224 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been an unfavorable prior year development of \$1,568,542 during 2019 for the year ended December 31, 2018. Original estimates are increased or decreased as additional information becomes known regarding individual claims.
- B. No material change.

Note 26-Intercompany Pooling Arrangements

No material change.

Note 27-Structured Settlement

No material change.

Note 28-Health Care Receivables

As of June 30, 2019 the identified pharmacy rebates recorded as healthcare receivables are \$2,384,331.

A. Pharmaceutical Rebate Receivables					
Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
6/30/2019	2,384,331	0	0	1,589,036	
3/31/2019	4,703,672	0	0	0	0
12/31/2018	2,709,854	0	0	0	1,149,826
9/30/2018	2,064,887	0	0	1,562,030	987,027
6/30/2018	3,061,739	0	0	0	0
3/31/2018	1,835,264	0	0	1,725,214	0
12/31/2017	1,635,264	0	0	817,633	0
9/30/2017	1,660,904	0	0	1,276,103	98,106
6/30/2017	1,420,745	0	0	675,751	0
3/31/2017	858,068	0	0	0	1,061,451
12/31/2016	0	0	0	0	1,380,457
9/30/2016	0	0	0	0	91,614
6/30/2016	0	0	0	0	454,343

- B. Risk Sharing Receivables – No material change.

Note 29-Participating Policies

No material change.

Note 30-Premium Deficiency Reserves

No material change.

NOTES TO FINANCIAL STATEMENTS

Note 31-Anticipated Salvage and Subrogation

No material change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes ☐ No ☒
- 1.2

If yes, has the report been filed with the domiciliary state?

Yes ☐ No ☐
- 2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes ☒ No ☐

If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes ☒ No ☐
- 3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group

0001411494
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒

If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.
- 4.2

If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?

Yes ☐ No ☒ NA ☐

If yes, attach an explanation.
- 6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2017
- 6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2017
- 6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

03/11/2019
- 6.4

By what department or departments?

Michigan Department of Insurance and Financial Services
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☒ No ☐ NA ☐
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☒ No ☐ NA ☐
- 7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒
- 8.2

If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☒ No ☐
- 8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
Apollo Capital Management, L.P.	New York, NY	NO	NO	NO	YES
Apollo Credit Management, LLC	New York, NY	NO	NO	NO	YES
Apollo Global Real Estate Management, L.P.	New York, NY	NO	NO	NO	YES
Apollo Investment Management, L.P.	New York, NY	NO	NO	NO	YES
Apollo Management, L.P.	New York, NY	NO	NO	NO	YES
Apollo Global Securities, LLC	New York, NY	NO	NO	NO	YES
Apollo Senior Floating Rate Fund, Inc.	New York, NY	NO	NO	NO	YES
Apollo Tactical Income Fund, Inc.	New York, NY	NO	NO	NO	YES
Apollo Investment Corporation, Inc.	New York, NY	NO	NO	NO	YES
Athene Securities, LLC	West De Moines, IA	NO	NO	NO	YES

GENERAL INTERROGATORIES

9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? .....  
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
(c) Compliance with applicable governmental laws, rules and regulations;  
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
(e) Accountability for adherence to the code.

Yes [X] No [ ]

9.11

If the response to 9.1 is No, please explain:  
.....

9.2

Has the code of ethics for senior managers been amended? .....

Yes [ ] No [X]

9.21

If the response to 9.2 is Yes, provide information related to amendment(s).  
.....

9.3

Have any provisions of the code of ethics been waived for any of the specified officers? .....

Yes [ ] No [X]

9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

FINANCIAL

10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?.....

Yes [X] No [ ]

10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:.....\$ .....4,440

INVESTMENT

11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) .....

Yes [ ] No [X]

11.2

If yes, give full and complete information relating thereto:  
.....

12.

Amount of real estate and mortgages held in other invested assets in Schedule BA: .....\$ .....0

13.

Amount of real estate and mortgages held in short-term investments: .....\$ .....0

14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates? .....

Yes [ ] No [X]

14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....0	\$ .....
14.22 Preferred Stock .....	\$ .....0	\$ .....
14.23 Common Stock .....	\$ .....0	\$ .....
14.24 Short-Term Investments .....	\$ .....0	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....	\$ .....
14.26 All Other .....	\$ .....	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....0	\$ .....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....	\$ .....	\$ .....

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB? .....

Yes [ ] No [X]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? .....

Yes [ ] No [ ]

If no, attach a description with this statement.

16

For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$ .....0

16.2

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$ .....0

16.3

Total payable for securities lending reported on the liability page

\$ .....0



GENERAL INTERROGATORIES

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity’s offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? .....

Yes [X] No [ ]

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Wells Fargo Institutional Trust Services.....	666 Walnut Street, Des Moines, IA 50309.....

17.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? .....

Yes [ ] No [X]

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

1 Name of Firm or Individual	2 Affiliation
Melissa Holmquist, CEO.....	I.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity’s assets?

Yes [ ] No [X]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity’s assets?

Yes [ ] No [X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of “A” (affiliated) or “U” (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? .....

Yes [X] No [ ]

18.2 If no, list exceptions:  
.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:  
Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or  
a. PL security is not available.  
b. Issuer or obligor is current on all contracted interest and principal payments.  
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?.....

Yes [ ] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:  
a. The security was purchased prior to January 1, 2018.  
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.  
The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is  
c. shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.  
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?.....

Yes [ ] No [X]

GENERAL INTERROGATORIES  
PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

87.5 %

1.2 A&H cost containment percent

1.2 %

1.3 A&H expense percent excluding cost containment expenses

5.0 %

2.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒

2.2

If yes, please provide the amount of custodial funds held as of the reporting date

\$

2.3

Do you act as an administrator for health savings accounts?

Yes ☐ No ☒

2.4

If yes, please provide the balance of the funds administered as of the reporting date

\$

3.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes ☐ No ☒

3.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes ☐ No ☒

**STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC**

## SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

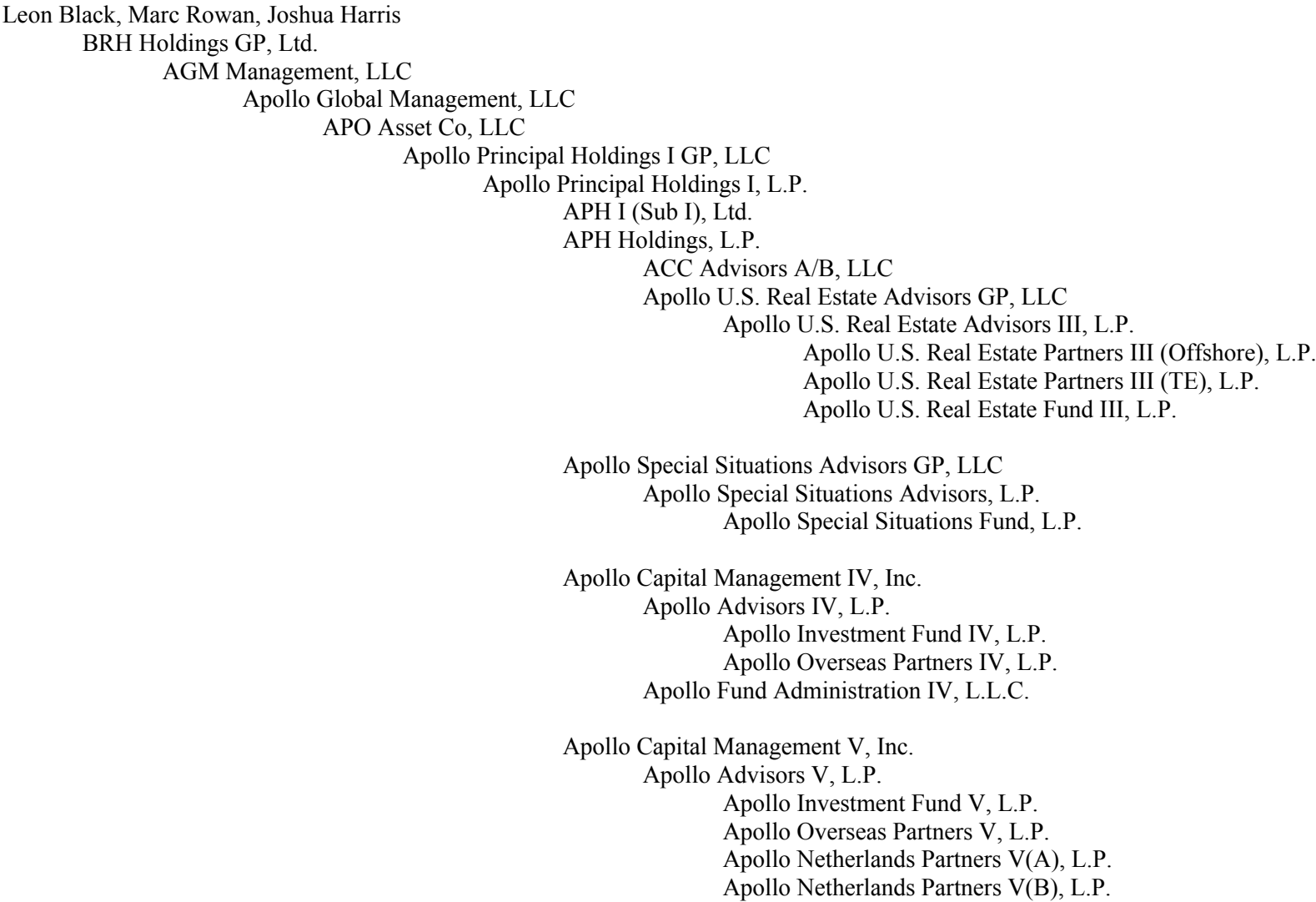
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories										
States, Etc.	1  Active Status (a)	Direct Business Only								
		2  Accident & Health Premiums	3  Medicare Title XVIII	4  Medicaid Title XIX	5  Federal Employees Health Benefits Program Premiums	6  Life & Annuity Premiums & Other Considerations	7  Property/ Casualty Premiums	8  Total Columns 2 Through 7	9  Deposit-Type Contracts	
1. Alabama .....	AL	N						0		
2. Alaska .....	AK	N						0		
3. Arizona .....	AZ	N						0		
4. Arkansas .....	AR	N						0		
5. California .....	CA	N						0		
6. Colorado .....	CO	N						0		
7. Connecticut .....	CT	N						0		
8. Delaware .....	DE	N						0		
9. Dist. Columbia .....	DC	N						0		
10. Florida .....	FL	N						0		
11. Georgia .....	GA	N						0		
12. Hawaii .....	HI	N						0		
13. Idaho .....	ID	N						0		
14. Illinois .....	IL	N						0		
15. Indiana .....	IN	N						0		
16. Iowa .....	IA	N						0		
17. Kansas .....	KS	N						0		
18. Kentucky .....	KY	N						0		
19. Louisiana .....	LA	N						0		
20. Maine .....	ME	N						0		
21. Maryland .....	MD	N						0		
22. Massachusetts .....	MA	N						0		
23. Michigan .....	MI	L	49,265,341	77,512,356				126,777,697		
24. Minnesota .....	MN	N						0		
25. Mississippi .....	MS	N						0		
26. Missouri .....	MO	N						0		
27. Montana .....	MT	N						0		
28. Nebraska .....	NE	N						0		
29. Nevada .....	NV	N						0		
30. New Hampshire .....	NH	N						0		
31. New Jersey .....	NJ	N						0		
32. New Mexico .....	NM	N						0		
33. New York .....	NY	N						0		
34. North Carolina .....	NC	N						0		
35. North Dakota .....	ND	N						0		
36. Ohio .....	OH	N						0		
37. Oklahoma .....	OK	N						0		
38. Oregon .....	OR	N						0		
39. Pennsylvania .....	PA	N						0		
40. Rhode Island .....	RI	N						0		
41. South Carolina .....	SC	N						0		
42. South Dakota .....	SD	N						0		
43. Tennessee .....	TN	N						0		
44. Texas .....	TX	N						0		
45. Utah .....	UT	N						0		
46. Vermont .....	VT	N						0		
47. Virginia .....	VA	N						0		
48. Washington .....	WA	N						0		
49. West Virginia .....	WV	N						0		
50. Wisconsin .....	WI	N						0		
51. Wyoming .....	WY	N						0		
52. American Samoa .....	AS	N						0		
53. Guam .....	GU	N						0		
54. Puerto Rico .....	PR	N						0		
55. U.S. Virgin Islands .....	VI	N						0		
56. Northern Mariana Islands .....	MP	N						0		
57. Canada .....	CAN	N						0		
58. Aggregate other alien .....	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal .....	XXX	0	49,265,341	77,512,356	0	0	0	126,777,697	0	0
60. Reporting entity contributions for Employee Benefit Plans .....	XXX							0		
61. Total (Direct Business) .....	XXX	0	49,265,341	77,512,356	0	0	0	126,777,697	0	0
DETAILS OF WRITE-INS										
58001. ....	XXX									
58002. ....	XXX									
58003. ....	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page .....	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above) .....	XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG .....1 R – Registered – Non-domiciled RRGs .....0  
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state .....0 Q – Qualified – Qualified or accredited reinsurer .....0  
N – None of the above – Not allowed to write business in the state .....56

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART



The organizational chart shows the ultimate controlling persons of the reporting entity together with Apollo Global Management, LLC (“AGM”), the Apollo Operating Group, subsidiaries of the Apollo Operating Group and the Apollo Funds. The Apollo Operating Group refers to (i) the limited partnerships through which the ultimate controlling persons currently operate Apollo’s business and (ii) one or more limited partnerships formed for the purposes of, among other activities, holding certain of Apollo’s gains or losses on its principal investments in the Apollo Funds. The Apollo Funds refers to the funds, alternative asset companies and other entities that are managed by the Apollo Operating Group. The organizational chart does not include subsidiaries or alternative investment vehicles of the Apollo Funds, which are included in Part 1A. Pursuant to a disclaimer of affiliation filed with the domiciliary insurance department of the reporting entity, the organizational chart also does not include any (i) personal investment entities of AGM’s controlling individuals, Leon Black, Joshua Harris and Marc Rowan, or (ii) portfolio companies, other than the following portfolio companies that control a United States domiciled insurer (excluding a captive insurer of a portfolio company) and their respective subsidiaries: Aspen Insurance Holdings Limited; Athene Holding Ltd.; Catalina Holdings (Bermuda) Ltd.; LifePoint Health, Inc.; OneMain Holdings, Inc.; and VA Capital Company LLC.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Apollo Fund Administration V, L.L.C.  
Apollo Verwaltungs V GmbH  
Apollo German Partners V GmbH & Co. KG

Apollo Capital Management VI, LLC  
Apollo Advisors VI, L.P.  
Apollo Investment Fund VI, L.P.  
Apollo Overseas Partners VI, L.P.  
Apollo Overseas Partners (Delaware) VI, L.P.  
Apollo Overseas Partners (Delaware 892) VI, L.P.  
Apollo Overseas Partners (Germany) VI, L.P.  
Apollo Management (Germany) VI, L.P.  
Apollo Fund Administration VI, LLC

Apollo Capital Management VII, LLC  
Apollo Advisors VII, L.P.  
Apollo Investment Fund VII, L.P.  
Apollo Investment Fund (I) VII, L.P.  
Apollo Overseas Partners VII, L.P.  
Apollo Overseas Partners (I) VII, L.P.  
Apollo Overseas Partners (Delaware) VII, L.P.  
Apollo Overseas Partners (Delaware 892) VII, L.P.  
Apollo Investment Fund (PB) VII, L.P.  
Apollo Fund Administration VII, LLC

Apollo Capital Management VIII, LLC  
Apollo Advisors VIII, L.P.  
Apollo Investment Fund VIII, L.P.  
Apollo Investment Fund (I) VIII, L.P.  
Apollo Overseas Partners VIII, L.P.  
Apollo Overseas Partners (I) VIII, L.P.  
Apollo Overseas Partners (Delaware) VIII, L.P.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Apollo Overseas Partners (Delaware 892) VIII, L.P.  
    Apollo Uniform GP, LLC  
        OMH Holdings, L.P.  
            OneMain Holdings, Inc.  
                Springleaf Finance, Inc.  
                    Springleaf Financial Asset Holdings, LLC  
                    Second Street Funding Corporation  
                        American General Mortgage Loan Trust 2006-1 (CL Trust)  
            Springleaf Financial Center Thrift Company  
            Springleaf Finance Corporation  
                Springleaf Branch Holding Company  
                MorEquity, Inc.  
                    Wilmington Finance, Inc.  
                Merit Life Insurance Co.  
                Springleaf Financial Funding II Holding Company  
                    Springleaf Financial Funding Company II  
                Springleaf Financial Funding Company  
                Springleaf Finance Commercial Corp.  
                Springleaf Finance Foundation, Inc.  
                CommoLoCo, Inc.  
                    CREDITHRIFT of Puerto Rico, Inc.  
                Springleaf Financial Technology, Inc.  
                Springleaf Financial Cash Services, Inc.  
                Springleaf Asset Holding II, Inc.  
                Springleaf Acquisition Corporation  
                    SpringCastle Holdings, LLC  
                OneMain General Services Corporation  
                    Springleaf Properties, Inc.  
                Springleaf Mortgage Holding Company  
                    OneMain Mortgage Services, Inc.  
                    Springleaf Mortgage Management Corporation  
                Springleaf Consumer Loan Holding Company  
                    OneMain Consumer Loan, Inc.  
                    Springleaf Consumer Loan of Pennsylvania, Inc.  
                    Springleaf Consumer Loan of West Virginia, Inc.  
                    Springleaf Consumer Loan Management Corporation  
                OneMain Direct Auto Funding, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

OneMain Direct Auto Receivables Trust 2017-1  
OneMain Direct Auto Receivables Trust 2018-1  
OneMain Direct Auto Receivables Trust 2019-1  
Twenty-Second Street Funding LLC  
    Springleaf Funding Trust 2015-A  
Springleaf Funding I, LLC  
    Springleaf Funding Trust 2016-A  
    Springleaf Funding Trust 2017-A  
Twenty-Third Street Funding LLC  
    Springleaf Funding Trust 2015-B  
Springleaf Funding II, LLC  
    OneMain Financial Issuance Trust 2018-2  
    OneMain Financial Issuance Trust 2019-1  
AGFC Capital Trust I  
Third Street Funding LLC  
Springleaf Asset Holding, Inc.  
Sixth Street Funding LLC  
Springleaf Asset Holdings, LLC  
Springleaf Financial Asset Holdings, LLC  
Mystic River Funding, LLC  
Hubbard River Funding, LLC  
Seine River Funding, LLC  
Thur River Funding, LLC  
New River Funding, LLC  
Fourth Avenue Auto Funding LLC  
Thayer Brook Funding, LLC  
Independence Holdings, LLC  
    OneMain Financial Holdings, LLC  
        OneMain Financial (HI), Inc.  
        OneMain Financial Group, LLC  
            OneMain Financial, Inc.  
            OneMain Financial of Minnesota, Inc.  
            Springleaf Documentation Services, Inc.  
OneMain Remarketing, LLC  
OMF HY, Inc.  
OneMain Alliance, LLC  
Triton Insurance Company



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Los Alamos Physician Practices, LLC  
Martinsville Physician Practices, LLC  
Memorial Prompt Care, LLC  
Mexia-Principal, Inc.  
    Texas Specialty Physicians  
    Mexia Principal Healthcare Limited Partnership  
Northeastern Nevada Physician Practices, LLC  
Palestine-Principal G.P., Inc.  
    Palestine Principal Healthcare Limited Partnership  
PHC-Aviation, Inc.  
PHC-Cleveland, Inc.  
PHC-Elko, Inc.  
PHC-Fort Mohave, Inc.  
PHC-Fort Morgan, Inc.  
PHC-Lake Havasu, Inc.  
    Havasu Regional Medical Center, LLC  
    HRMC, LLC  
PHC-Lakewood, Inc.  
    PHC-Morgan City, L.P.  
PHC-Las Cruces, Inc.  
PHC-Los Alamos, Inc.  
PHC-Minden G.P., Inc.  
    PHC-Minden, LLC  
PHC-Morgan Lake, Inc.  
    PHC-Morgan City, L.P.  
PHC-Selma, LLC  
PHC-Tennessee, Inc.  
PRHC-Alabama, LLC  
    Vaughan Physician Practices, LLC  
    Vaughan Regional Medical Center, LLC  
PRHC-Ennis G.P., Inc.  
    PRHC-Ennis, L.P.  
Principal Hospital Company of Nevada, Inc.  
    Palestine Principal Healthcare Limited Partnership  
    Mexia Principal Healthcare Limited Partnership  
    PRHC-Ennis, L.P.  
Principal-Needles, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

- Teche Regional Physician Practices, LLC
- Valley View Physician Practices, LLC
- Historic LifePoint Hospitals, LLC
- LifePoint Hospitals Holdings, LLC
  - AdvantagePoint Health Alliance, LLC
    - AdvantagePoint Health Alliance – Blue Ridge, LLC
    - AdvantagePoint Health Alliance – Columbus, LLC
    - AdvantagePoint Health Alliance – Fauquier, LLC
    - AdvantagePoint Health Alliance – Great Lakes, LLC
    - AdvantagePoint Health Alliance – Laurel Highlands, LLC
    - AdvantagePoint Health Alliance – National, LLC
    - AdvantagePoint Health Alliance – Western North Carolina, LLC
- Ashley Valley Medical Center, LLC
- Ashley Valley Physician Practice, LLC
- Castlevue Medical, LLC
  - Castlevue Hospital, LLC
  - Castlevue Physician Practice, LLC
- Dodge City Healthcare Partner, Inc.
- Home Health Partner, LLC
- HSC Credentialing Support Services, LLC
- HSCGP, LLC
  - LifePoint Corporate Services
    - America Management Companies, LLC
    - LifePoint Billing Services, LLC
- Lander Valley Physician Practices, LLC
- LifePoint CSLP, LLC
  - LifePoint Corporate Services, General Partnership
- LifePoint Holdings 2, LLC
  - Acquisition Bell Hospital, LLC
    - Upper Peninsula Health Plan, LLC
    - Upper Peninsula Managed Care, LLC
- AMG-Crockett, LLC
- AMG-Livingston, LLC
- AMG-Logan, LLC
- AMG-Southern Tennessee, LLC
- AMG-Trinity, LLC
- Andalusia Physician Practices, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

- Andalusia Professional Services, LLC
- Athens Physicians Practice, LLC
- Athens Regional Medical Center, LLC
- Athens Surgery Center Partner, LLC
  - Athens Surgery Center, LLC
- Bell JV, LLC
- Bell Physician Practices, Inc.
- Clark Regional Physician Practices, LLC
- Community Hospital of Andalusia, LLC
- Community Medical, LLC
- Community-Based Services, LLC
- Crockett Hospital, LLC
- Crockett PHO, LLC
- Danville Diagnostic Imaging Center, LLC
- Danville Physician Practices, LLC
- Danville Regional Medical Center, LLC
  - Danville Regional Medical Center School of Health Professions, LLC
- Gateway Health Alliance, Inc.
- Memorial Hospital of Martinsville & Henry County Ambulatory Surgery Center, LLC
- Two Rivers Physician Practices, LLC
- DLP Partner, LLC
  - DLP Healthcare, LLC
    - DLP Marquette Holding Company, LLC
      - DLP Marquette Health Plan, LLC
        - Upper Peninsula Health Plan, LLC
        - Upper Peninsula Managed Care, LLC
      - DLP Marquette General Hospital, LLC
      - DLP Marquette JV, LLC
        - U.P. Imaging Management Services, LLC
      - DLP Marquette Physician Practices, Inc.
    - DLP Cardiac Partners, LLC
    - DLP Central NC Holding Company, LLC
      - DLP Central Carolina Medical Center, LLC
        - DLP Central Carolina Family Medicine, LLC
        - DLP Central Carolina Medical Group, LLC
        - DLP Central Carolina Physician Practices, LLC
      - DLP Central NC JV, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

- DLP Frye Regional Medical Center, LLC
  - DLP Cardiology Associates, LLC
  - DLP Cardiology Physicians, LLC
  - DLP Frye Medical Group, LLC
  - DLP Frye Regional Physician Practices, LLC
  - DLP Graystone Family Practice Associates, LLC
  - DLP Hickory Family Practice Associates, LLC
  - Guardian Health Service, L.L.C.
- DLP Conemaugh Holding Company, LLC
  - DLP Conemaugh JV, LLC
  - DLP Conemaugh Memorial Medical Center, LLC
  - DLP Conemaugh Meyersdale Medical Center, LLC
  - DLP Conemaugh Miners Medical Center, LLC
  - DLP Conemaugh Physician Practices, LLC
- DLP Good Shepherd Holding Company, LLC
  - DLP Good Shepherd JV, LLC
  - DLP Gregg County Hospital, LLC
  - DLP Marshall Medical Center, LLC
- DLP Harris JV, LLC
- DLP Harris Regional Hospital, LLC
  - DLP Western Carolina Physician Practices, LLC
- DLP Haywood Regional Medical Center, LLC
- DLP Maria Parham Medical Center, LLC
  - DLP Maria Parham Physician Practices, LLC
- DLP Person Memorial Hospital, LLC
  - DLP Person Physician Practices, LLC
  - DLP Person Urgent Care, LLC
- DLP Rutherford Regional Health System, LLC
  - DLP Rutherford Physician Practices, LLC
- DLP Swain County Hospital, LLC
- DLP Twin County Holding Company, LLC
  - DLP Twin County Physician Practices, LLC
  - DLP Twin County Regional Healthcare, LLC
- DLP Wilson Holding Company, LLC
  - DLP WilMed Nursing Care and Rehabilitation Center, LLC
  - DLP Wilson Medical Center, LLC
  - DLP Wilson Physician Practices, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

DLP Partner Central Carolina, LLC  
DLP Partner Conemaugh, LLC  
DLP Partner Frye, LLC  
DLP Partner Marquette, LLC  
DLP Partner MedWest, LLC  
DLP Partner Twin County, LLC  
DLP Partner Wilson Rutherford, LLC  
Fauquier Partner, LLC  
    Fauquier Holding Company, LLC  
        Fauquier Diagnostic Imaging Center, LLC  
        Fauquier Long-Term Care, LLC  
        Fauquier Medical Center, LLC  
        Fauquier Physician Practices, LLC  
Georgetown Rehabilitation, LLC  
HDP Andalusia, LLC  
HDP Georgetown, LLC  
Hillside Hospital, LLC  
HSC Manager, LLC  
Kansas Healthcare Management Company, Inc.  
    Kansas Healthcare Management Services, LLC  
Kansas Healthcare Management Services, LLC  
Kentucky Hospital, LLC  
Kentucky Medserv, LLC  
Kentucky Physician Services, Inc.  
LHSC, LLC  
LifePoint Medical Group – Hillside, Inc.  
    AMG-Hillside, LLC  
LifePoint of Kentucky, LLC  
    Bourbon Community Hospital, LLC  
    Bourbon Physician Practice, LLC  
    Buffalo Trace Radiation Oncology Associates, LLC  
    Fleming Medical Center, LLC  
    Georgetown Community Hospital, LLC  
    HCK Logan Memorial, LLC  
    Kentucky MSO, LLC  
    Logan Memorial Hospital, LLC  
    Meadowview Physician Practice, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Meadowview Regional Medical Center, LLC  
PineLake Physician Practice, LLC  
PineLake Regional Hospital, LLC  
R. Kendall Brown Practice, LLC  
Silechnik Practice, LLC  
Woodford Hospital, LLC  
Logan Physician Practice, LLC  
LifePoint of Lake Cumberland, LLC  
LCMC PET, LLC  
Somerset Surgery Partner, LLC  
Lake Cumberland Surgery Center, LP  
Lake Cumberland Cardiology Associates, LLC  
Lake Cumberland Physician Practices, LLC  
LCMC MRI, LLC  
Lake Cumberland Regional Hospital, LLC  
Lake Cumberland Regional Physician Hospital Organization, LLC  
LifePoint RC, Inc.  
Livingston Regional Hospital, LLC  
Logan Medical, LLC  
Meadowview Rights, LLC  
Nason Medical Center, LLC  
Nason Physician Practices, LLC  
Northwest Medical Center-Winfield, LLC  
Norton Partner, LLC  
The Regional Health Network of Kentucky and Southern Indiana, LLC  
RHN Clark Memorial Hospital, LLC  
RHN Clark Memorial Physician Practices, LLC  
RHN Scott Memorial Hospital, LLC  
RHN Scott Physician Practices, LLC  
NWMC-Winfield Hospitalist Physicians, LLC  
NWMC-Winfield Physician Practices, LLC  
OmniPoint Surgical Associates, LLC  
Piedmont Partner, LLC  
Portage Holding Company, LLC  
PH Copper Country Apothecaries, LLC  
Portage Hospital, LLC  
Portage Calumet MOB, LLC

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

Portage JV, LLC  
    Ontonagon Community Health Center, Inc.  
    Upper Peninsula Health Plan, LLC  
    Upper Peninsula Managed Care, LLC  
    Portage Physician Practices, Inc.  
Portage Partner, LLC  
Professional Billing Services, LLC  
Providence Holding Company, LLC  
    Providence Group Practices, LLC  
    Providence Group Practices II, LLC  
    Providence Hospital, LLC  
        PERS Legacy, LLC  
        Providence Imaging Center, LLC  
        Providence Professional Services, LLC  
    Providence Physician Practices, LLC  
River Parishes Hospital, LLC  
River Parishes Partner, LLC  
River Parishes Physician Practices, LLC  
Riverview Medical Center, LLC  
Riverview Physician Practices, LLC  
Rockdale Clinically Integrated Medical Care Organization, LLC  
Rockdale Hospital, LLC  
Rockdale Physician Practices, LLC  
Smith County Memorial Hospital, LLC  
Southern Tennessee EMS, LLC  
Southern Tennessee Medical Center, LLC  
Southern Tennessee PHO, LLC  
Spring View Hospital, LLC  
Spring View Physician Practices, LLC  
Springhill Medical Center, LLC  
St. Francis Affiliated Services, LLC  
St. Francis Health, LLC  
St. Francis Physician Practices, LLC  
Sumner Physician Practices, LLC  
Sumner Real Estate Holdings, LLC  
Sumner Regional Medical Center, LLC  
    SST Community Health, L.L.C.



SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

THM Physician Practice, LLC  
Trousdale Medical Center, LLC  
Trousdale Physician Practices, LLC  
Ville Platte Medical Center, LLC  
Watertown Partner, LLC  
    Watertown Holding Company, LLC  
        Watertown JV, LLC  
            Watertown Network, LLC  
            Watertown Medical Center, LLC  
            Watertown Physician Practices, LLC  
    Wythe County Community Hospital, LLC  
    Wythe County Physician Practices, LLC  
LifePoint NMTC, LLC  
LifePoint PSO, LLC  
Logan General Hospital, LLC  
    Logan Healthcare Partner, LLC  
My HealthPoint, LLC  
Poitras Practice, LLC  
Riverton Memorial Hospital, LLC  
Riverton Oncology Practice, LLC  
Riverton Physician Practices, LLC  
Shared Business Services, LLC  
Western Plains Regional Hospital, LLC  
    Dodge City Healthcare Group, LLC  
        Western Plains Physician Practices, LLC  
Capella Health Holdings, LLC  
    Capella Holdings, LLC  
        Auriga Insurance Group  
        Capella Healthcare, LLC  
            Capella DISCO, LLC  
            Carolina Pines Holdings, LLC  
                Hartsville Medical Group, LLC  
                Hartsville, LLC  
        Kershaw Health Holdings, LLC  
            Kershaw Anesthesia, LLC  
            Kershaw Clinics, LLC  
            Kershaw Hospital, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

KershawHealth Ambulatory Surgery Center, LLC  
KershawHealth Cancer Center, LLC  
Lawton Holdings, LLC  
Lawton Surgery Investment Company, LLC  
Southwestern Medical Center, LLC  
Southwestern Neurosurgery Physicians, LLC  
Southwestern Physician Services, LLC  
Southwestern Radiology Affiliates, LLC  
Southwestern Surgical Affiliates, LLC  
Midlands HealthOne Network, LLC  
Muskogee Holdings, LLC  
Capella Holdings of Oklahoma, LLC  
Muskogee Medical and Surgical Associates, LLC  
Muskogee Physician Group, LLC  
Muskogee Regional Medical Center, LLC  
Providence MRI Associates, L.L.C.  
Providence Radiologic Services, L.C.  
NPMC Holdings, LLC  
Arkansas Healthcare Services, LLC  
Hot Springs Imaging Center, LLC  
Hot Springs National Park Hospital Holdings, LLC  
National Park Real Property, LLC  
National Park Cardiology Services, LLC  
National Park Endoscopy Center, LLC  
National Park Family Care, LLC  
National Park GI Services, LLC  
NPMC, LLC  
Oregon Healthcorp, LLC  
McMinnville Immediate Health Care, LLC  
Willamette Valley Clinics, LLC  
Willamette Valley Health Solutions, LLC  
Willamette Valley Medical Center, LLC  
RCCH PMDS, LLC  
RCCH Washington Holdings, LLC  
CMCH Holdings, LLC  
Capital Medical Center Holdings, LLC  
Capital Medical Center Specialty Physicians, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Capital Medical Center Partner, LLC  
Columbia Capital Medical Center Limited Partnership  
Capital Medical Center Physicians, LLC  
Capital Medical Center Specialty Physicians, LLC  
Columbia Olympia Management, Inc.  
Columbia Capital Medical Center Limited Partnership  
WPC Holdco, LLC  
Columbia Capital Medical Center Limited Partnership  
Capital Medical Center Physicians, LLC  
Capital Medical Health Solutions, LLC  
Lourdes Holdings, LLC  
Lourdes Hospital, LLC  
Lourdes Physician Services, LLC  
RCCH-Northwest, LLC  
RCCH-UW Medicine Healthcare Holdings, LLC  
CCMC Holdeo, LLC  
RCCH Trios Health Holdings, LLC  
RCCH Trios Health, LLC  
RCCH Trios Physicians, LLC  
Saline County Hospital, LLC  
St. Joseph Holdings, LLC  
St. Joseph Hospital, LLC  
SJRMC Interventional Radiology Services, LLC  
St. Joseph Physician Services, LLC  
St. Mary’s Holdings, LLC  
Russellville Holdings, LLC  
St. Mary’s Real Property, LLC  
Saint Mary’s Primary Care Network, LLC  
St. Mary’s Physician Services, LLC  
Saline County Medical Center Joint Venture, LLC  
Saline Clinics, LLC  
Saline Hospital, LLC  
LifePoint Acquisition Corp.  
LifePoint VA Holdings, Inc.  
Clinch Professional Physician Services, LLC  
Clinch Valley Medical Center, Inc.  
Clinch Valley Physicians Associates, LLC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART

Clinch Valley Pulmonology, LLC  
Clinch Valley Urology, LLC  
Orthopedics of Southwest Virginia, LLC  
LifePoint WV Holdings, Inc.  
Raleigh General Hospital, LLC  
Zone, Incorporated  
West Virginia Management Services Organization, Inc.  
RCHP, LLC  
RCHP Management Company, Inc.  
RegionalCare Hospital Partners, Inc.  
Essent Healthcare, Inc.  
EHCO, LLC  
Essent Healthcare of Massachusetts, Inc.  
Essent Haverhill Healthcare Group, Inc.  
Essent DISCO, LLC  
Essent Healthcare – Ayer, Inc.  
Essent – Ayer Healthcare Group, Inc.  
Essent Healthcare – Paris, Inc.  
EHC PRMC G.P., LLC  
Essent PRMC, L.P.  
Texas & Oklahoma Preferred Provider System  
EHC PRMC L.P., LLC  
Essent PRMC, L.P.  
Lamar County Clinical Services, Inc.  
PRMC ER Group, Inc.  
PRMC Healthcare Group, Inc.  
Essent Healthcare – Pennsylvania, Inc.  
Essent Healthcare – Waynesburg, LLC  
SRMC Healthcare Group, LLC  
Essent Realty, Inc.  
Sharon Hospital Holding Company  
Essent Healthcare of Connecticut, Inc.  
Florence Physicians, LLC  
ECM Health Group, LLC  
ECM TVCC, LLC  
North Alabama Neuroservices, LLC  
North Alabama Ob-Gyn, LLC

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	27-0470646.....				RegionalCare Hospital Partners, Inc.....	DE.....	NIA.....	RCHP, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-4000401.....				RHN Clark Memorial Hospital, LLC.....	DE.....	NIA.....	The Regional Health Network of Kentucky and Southern Indiana, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	61-1764853.....				RHN Clark Memorial Physician Practices, LLC.....	DE.....	NIA.....	RHN Clark Memorial Hospital, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	46-1113518.....				RHN Scott Memorial Hospital, LLC.....	DE.....	NIA.....	The Regional Health Network of Kentucky and Southern Indiana, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	37-1705734.....				RHN Scott Physician Practices, LLC.....	DE.....	NIA.....	RHN Scott Memorial Hospital, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-0959379.....				River Parishes Hospital, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-2502853.....				River Parishes Partner, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-1227403.....				River Parishes Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762468.....				Riverton Memorial Hospital, LLC.....	DE.....	NIA.....	LifePoint Hospitals Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	26-3839861.....				Riverton Oncology Practice, LLC.....	DE.....	NIA.....	LifePoint Hospitals Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1763635.....				Riverton Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Hospitals Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	62-1762469.....				Riverview Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	45-3853399.....				Riverview Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	45-4282120.....				Rockdale Clinically Integrated Medical Care Organization, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	26-3202930.....				Rockdale Hospital, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-1363956.....				Rockdale Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2258662.....				RRL Ottumwa, LLC.....	DE.....	NIA.....	RCHP-Ottumwa, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1771866.....				Russellville Holdings, LLC.....	DE.....	NIA.....	St. Mary's Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	35-2632651.....				Saint Mary's Primary Care Network, LLC.....	DE.....	NIA.....	St. Mary's Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	81-2831831.....				Saline Clinics, LLC.....	DE.....	NIA.....	Saline County Medical Center Joint Venture, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	37-1875655.....				Saline County Hospital, LLC.....	DE.....	NIA.....	Capella Healthcare, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	37-1828157.....				Saline County Medical Center Joint Venture, LLC.....	DE.....	NIA.....	Capella Healthcare, LLC.....	Ownership.....	51.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	37-1828157.....				Saline County Medical Center Joint Venture, LLC.....	DE.....	NIA.....	Saline County Medical Center.....	Ownership.....	49.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	71-0799300.....				Saline FirstCare, Inc.....	AK.....	NIA.....	Hospital, LLC.....	Ownership.....	33.3	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	71-0799300.....				Saline FirstCare, Inc.....	AK.....	NIA.....	Physician Investors.....	Ownership.....	33.3	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	71-0799300.....				Saline FirstCare, Inc.....	AK.....	NIA.....	Licensed Healthcare Professional Members.....	Ownership.....	33.3	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	81-2816675.....				Saline Hospital, LLC.....	DE.....	NIA.....	Saline County Medical Center Joint Venture, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-4681738.....				Shared Business Services, LLC.....	DE.....	NIA.....	LifePoint Hospitals Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	33-1032693.....				Sharon Hospital Holding Company.....	DE.....	NIA.....	EHC0, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	32-0381422.....				Shoals Health Group, LLC.....	DE.....	NIA.....	Florence Physicians, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	37-1741217.....				Shoals Obstetrics and Gynecology, LLC.....	DE.....	NIA.....	Florence Physicians, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	45-5495321.....				Sierra Vista Regional Health Center Medical Group, L.L.C.....	AZ.....	NIA.....	RCHP-Sierra Vista Holding, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762275.....				Siletnchnik Practice, LLC.....	DE.....	NIA.....	LifePoint of Kentucky, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	46-3218523.....				SJRMCI nterventional Radiology Services, LLC.....	ID.....	NIA.....	St. Joseph Hospital, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1762490.....				Smith County Memorial Hospital, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1864098.....				Somerset Surgery Partner, LLC.....	DE.....	NIA.....	LifePoint of Lake Cumberland, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1763622.....				Southern Tennessee EMS, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1762535.....				Southern Tennessee Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1824632.....				Southern Tennessee PHO, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	62-1757662.....				Southwestern Medical Center, LLC.....	DE.....	NIA.....	Lawton Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	20-1084297.....				Southwestern Neurosurgery Physicians, LLC.....	OK.....	NIA.....	Lawton Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	57-1141094.....				Southwestern Physician Services, LLC.....	OK.....	NIA.....	Lawton Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	27-3256164.....				Southwestern Radiology Affiliates, LLC.....	DE.....	NIA.....	Lawton Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	26-3311227.....				Southwestern Surgical Affiliates, LLC.....	DE.....	NIA.....	Lawton Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0



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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	20-0155414.....				Spring View Hospital, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-4302480.....				Spring View Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1754936.....				Springhill Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-4269117.....				SRMC Healthcare Group, LLC.....	DE.....	NIA.....	Essent Healthcare Pennsylvania, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1835614.....				SST Community Health, L.L.C.....	TN.....	NIA.....	Sumner Regional Medical Center, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-5607993.....				St. Francis Affiliated Services, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-5259919.....				St. Francis Health, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-5419443.....				St. Francis Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	61-1804883.....				St. Joseph Holdings, LLC.....	DE.....	NIA.....	Capella Healthcare, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	61-1804883.....				St. Joseph Hospital, LLC.....	DE.....	NIA.....	St. Joseph Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	81-4256127.....				St. Joseph Physician Services, LLC.....	DE.....	NIA.....	St. Joseph Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	26-4088270.....				St. Mary's Holdings, LLC.....	DE.....	NIA.....	Capella Healthcare, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1769626.....				St. Mary's Physician Services, LLC.....	DE.....	NIA.....	St. Mary's Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762460.....				St. Mary's Real Property, LLC.....	DE.....	NIA.....	Russellville Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2618964.....				Sumner Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2618993.....				Sumner Real Estate Holdings, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2618766.....				Sumner Regional Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-4583254.....				Teche Regional Physician Practices, LLC.....	DE.....	NIA.....	Province Healthcare Company, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	75-2623970.....				Texas & Oklahoma Preferred Provider System.....	TX.....	NIA.....	Essent PRMC, L.P.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	26-2477205.....				Texas Specialty Physicians.....	TX.....	NIA.....	Mexia-Principal, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762591.....				THM Physician Practice, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	80-0835692.....				The Regional Health Network of Kentucky and Southern Indiana, LLC.....	DE.....	NIA.....	Norton Partner, LLC.....	Ownership.....	75.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	80-0835692.....				The Regional Health Network of Kentucky and Southern Indiana, LLC.....	DE.....	NIA.....	Norton Enterprises, Inc.....	Ownership.....	25.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2618876.....				Trousdale Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	45-3853454.....				Trousdale Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	36-4796940.....				Two Rivers Physician Practices, LLC.....	DE.....	NIA.....	Danville Regional Medical Center, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-2272410.....				U.P. Imaging Management Services, LLC.....	MI.....	NIA.....	DLP Marquette JV, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
04734.....	Apollo Global Mgmt Grp.....	52615.....	46-0927995.....				Upper Peninsula Health Plan, LLC.....	MI.....	RE.....	Acquisition Bell Hospital, LLC.....	Ownership.....	5.4	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
04734.....	Apollo Global Mgmt Grp.....	52615.....	46-0927995.....				Upper Peninsula Health Plan, LLC.....	MI.....	RE.....	DLP Marquette Health Plan.....	Ownership.....	59.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
04734.....	Apollo Global Mgmt Grp.....	52615.....	46-0927995.....				Upper Peninsula Health Plan, LLC.....	MI.....	RE.....	Portage JV, LLC.....	Ownership.....	10.5	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	38-3323620.....				Upper Peninsula Managed Care, LLC.....	MI.....	NIA.....	Acquisition Bell Hospital, LLC.....	Ownership.....	5.4	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	38-3323620.....				Upper Peninsula Managed Care, LLC.....	MI.....	NIA.....	DLP Marquette Health Plan.....	Ownership.....	59.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	38-3323620.....				Upper Peninsula Managed Care, LLC.....	MI.....	NIA.....	Portage JV, LLC.....	Ownership.....	10.5	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	26-4227573.....				Valley View Physician Practices, LLC.....	DE.....	NIA.....	Province Healthcare Company, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-5831435.....				Vaughan Physician Practices, LLC.....	DE.....	NIA.....	PRHC-Alabama, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1864231.....				Vaughan Regional Medical Center, LLC.....	DE.....	NIA.....	PRHC-Alabama, LLC.....	Ownership.....	99.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1864231.....				Vaughan Regional Medical Center, LLC.....	DE.....	NIA.....	Vaughan Place Senior Living Community, Inc.....	Ownership.....	1.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
04734.....	Apollo Global Mgmt Grp.....	00000.....	66-0650377.....				Vigilant Insurance Company, Inc.....	CYM.....	IA.....	RCHP, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1868757.....				Ville Platte Medical Center, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	61-1757641.....				Watertown Holding Company, LLC.....	DE.....	NIA.....	Greater Watertown Community Health Foundation.....	Ownership.....	20.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	61-1757641.....				Watertown Holding Company, LLC.....	DE.....	NIA.....	Watertown Partner, LLC.....	Ownership.....	80.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-4583358.....				Watertown JV, LLC.....	DE.....	NIA.....	Watertown Holding Company, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-3937421.....				Watertown Medical Center, LLC.....	WI.....	NIA.....	Watertown Holding Company, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	26-2483488.....				Watertown Network, LLC.....	WI.....	NIA.....	Watertown JV, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

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SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	47-3450210.....				Watertown Partner, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	47-3943680.....				Watertown Physician Practices, LLC.....	WI.....	NIA.....	Watertown Holding Company, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1630580.....				West Virginia Management Services Organization, Inc.....	WV.....	NIA.....	LifePoint WV Holdings, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	20-8179824.....				Western Plains Physician Practices, LLC.....	DE.....	NIA.....	Dodge City Healthcare Group, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762592.....				Western Plains Regional Hospital, LLC.....	DE.....	NIA.....	LifePoint Hospitals Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1766695.....				Willamette Valley Clinics, LLC.....	DE.....	NIA.....	Oregon Healthcorp, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	46-1967992.....				Willamette Valley Health Solutions, LLC.....	DE.....	NIA.....	Oregon Healthcorp, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	62-1762552.....				Willamette Valley Medical Center, LLC.....	DE.....	NIA.....	Oregon Healthcorp, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-3723378.....				Wilmington Physicians Group, LLC.....	DE.....	NIA.....	Wilmington Physicians Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	27-3723353.....				Wilmington Physicians Holdings, LLC.....	DE.....	NIA.....	RegionalCare Hospital Partners, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	52-2260534.....				Woodford Hospital, LLC.....	DE.....	NIA.....	LifePoint of Kentucky, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....	62-1839545.....				WPC Holdco, LLC.....	DE.....	NIA.....	Capital Medical Center Holdings, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	20-2468795.....				Wythe County Community Hospital, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	20-3230510.....				Wythe County Physician Practices, LLC.....	DE.....	NIA.....	LifePoint Holdings 2, LLC.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	98-1448477.....				Highlands Holdings, Ltd.....	BMU.....	NIA.....	AP Highlands Holdings, L.P.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....			0001267395	NYSE: AHL.....	Aspen Insurance Holdings Limited.....	BMU.....	NIA.....	Highlands Holdings, Ltd.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....					Aspen Insurance Ireland Holdings Limited.....	IRL.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....					Aspen Insurance Designated Activity Company.....	IRL.....	NIA.....	Aspen Insurance Ireland Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	AA-3194168.....				Aspen Bermuda Limited.....	BMU.....	IA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....					Aspen (UK) Holdings Limited.....	GBR.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....					Aspen European Holdings Limited.....	GBR.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	AA-1120337.....				Aspen Insurance UK Limited.....	GBR.....	IA.....	Aspen European Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....					Acorn Limited.....	BMU.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Blue Waters Insurers, Corp.....	PR.....	NIA.....	Acorn Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen Managing Agency Limited.....	GBR.....	IA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen Singapore Pte. Limited.....	SGP.....	NIA.....	Aspen Managing Agency Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen Underwriting Limited.....	GBR.....	IA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Silverton Re Ltd.....	BMU.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen (US) Holdings Limited.....	GBR.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen Capital Management Limited.....	BMU.....	NIA.....	Aspen Insurance Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....	30-0793138.....				Aspen Capital Advisors Inc.....	DE.....	NIA.....	Aspen US Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Peregrine Re Ltd.....	BMU.....	NIA.....	Aspen Capital Management Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0
00000.....		00000.....					Aspen Cat Fund Limited.....	BMU.....	NIA.....	Aspen Capital Management Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	.0

SCHEDULE Y  
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
00000.....		00000.....					Aspen Recoveries Limited.....	GBR.....	NIA.....	Aspen (UK) Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....					Aspen Risk Manangement Limited.....	GBR.....	NIA.....	Aspen (UK) Holdings Limited.....	Ownership.....	80.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....	N.....	0
00000.....		00000.....	30-0190766.....				Aspen U.S. Holdings, Inc.....	DE.....	NIA.....	Aspen (UK) Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....					Aspen Insurance UK Services Limited.....	GBR.....	NIA.....	Aspen (UK) Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....					Chaspark Maritime Holdings Pte Ltd.....	SGP.....	NIA.....	Aspen Recoveries Limited.....	Ownership.....	58.5	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....					APJ Continuation Limited.....	GBR.....	NIA.....	Aspen (UK) Holdings Limited.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
04734.....	Apollo Global Mgmt Grp.....	43460.....	75-2344200.....				Aspen American Insurance Company.....	TX.....	IA.....	Aspen U.S. Holdings, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
04734.....	Apollo Global Mgmt Grp.....	10717.....	06-1463851.....				Aspen Specialty Insurance Company.....	ND.....	IA.....	Aspen American Insurance Company.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....	32-0085193.....				Aspen Insurance U.S. Services Inc.....	DE.....	NIA.....	Aspen U.S. Holdings, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....	03-0528326.....				Aspen Specialty Insurance Management, Inc.....	MA.....	NIA.....	Aspen U.S. Holdings, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		
00000.....		00000.....	73-1689025.....				Aspen Re America, Inc.....	DE.....	NIA.....	Aspen U.S. Holdings, Inc.....	Ownership.....	100.0	Apollo Global Management, LLC; Leon Black; Joshua Harris; Marc Rowan.....		



## 16.12

[illegible]

Asterisk	Explanation
0000010	DLP Marquette Holding Company, LLC is also the sole member of DLP Marquette General Hospital, LLC.....
0000023	Upper Peninsula Managed Care, LLC has a contractual relationship only with the insurer.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

.....NO.....

Explanation:

Bar Code:

1.



5 2 6 1 5 2 0 1 9 3 6 5 0 0 0 0 2

**OVERFLOW PAGE FOR WRITE-INS**

SCHEDULE A – VERIFICATION

Real Estate

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	11,694,467	12,047,264
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		.0
2.2 Additional investment made after acquisition .....		21,993
3. Current year change in encumbrances .....		.0
4. Total gain (loss) on disposals .....		.0
5. Deduct amounts received on disposals .....		.0
6. Total foreign exchange change in book/adjusted carrying value .....		.0
7. Deduct current year's other-than-temporary impairment recognized .....		.0
8. Deduct current year's depreciation .....	187,584	374,790
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	11,506,883	11,694,467
10. Deduct total nonadmitted amounts .....	.0	.0
11. Statement value at end of current period (Line 9 minus Line 10) .....	11,506,883	11,694,467

SCHEDULE B – VERIFICATION

Mortgage Loans

	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....	.0	.0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		.0
2.2 Additional investment made after acquisition .....		.0
3. Capitalized deferred interest and other .....		.0
4. Accrual of discount .....		.0
5. Unrealized valuation increase (decrease) .....		.0
6. Total gain (loss) on disposals .....		.0
7. Deduct amounts received on disposals .....		.0
8. Deduct amortization of premium and mortgage interest points and commitment fees .....		.0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		.0
10. Deduct current year's other-than-temporary impairment recognized .....		.0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	.0	.0
12. Total valuation allowance .....		.0
13. Subtotal (Line 11 plus Line 12) .....	.0	.0
14. Deduct total nonadmitted amounts .....	.0	.0
15. Statement value at end of current period (Line 13 minus Line 14) .....	0	0

NONE

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	.0	.0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		.0
2.2 Additional investment made after acquisition .....		.0
3. Capitalized deferred interest and other .....		.0
4. Accrual of discount .....		.0
5. Unrealized valuation increase (decrease) .....		.0
6. Total gain (loss) on disposals .....		.0
7. Deduct amounts received on disposals .....		.0
8. Deduct amortization of premium and depreciation .....		.0
9. Total foreign exchange change in book/adjusted carrying value .....		.0
10. Deduct current year's other-than-temporary impairment recognized .....		.0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) .....	.0	.0
12. Deduct total nonadmitted amounts .....	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12) .....	0	0

NONE

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	21,647,349	19,198,351
2. Cost of bonds and stocks acquired .....	14,382,003	7,662,848
3. Accrual of discount .....	6,062	6,249
4. Unrealized valuation increase (decrease) .....	.0	.0
5. Total gain (loss) on disposals .....	.0	.0
6. Deduct consideration for bonds and stocks disposed of .....	3,450,000	5,182,000
7. Deduct amortization of premium .....	27,187	38,099
8. Total foreign exchange change in book/adjusted carrying value .....	.0	.0
9. Deduct current year's other-than-temporary impairment recognized .....	.0	.0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	.0	.0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	32,558,227	21,647,349
12. Deduct total nonadmitted amounts .....	.0	.0
13. Statement value at end of current period (Line 11 minus Line 12) .....	32,558,227	21,647,349

STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	34,541,631	8,256,044	7,248,838	(1,843)	34,541,631	35,546,994	0	32,853,721
2. NAIC 2 (a).....	2,250,000	0	250,000	(250,000)	2,250,000	1,750,000	0	2,250,000
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0			250,000	0	250,000	0	0
7. Total Bonds	36,791,631	8,256,044	7,498,838	(1,843)	36,791,631	37,546,994	0	35,103,721
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0				0	0	0	0
9. NAIC 2 .....	0				0	0	0	0
10. NAIC 3 .....	0				0	0	0	0
11. NAIC 4 .....	0				0	0	0	0
12. NAIC 5 .....	0				0	0	0	0
13. NAIC 6 .....	0				0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	36,791,631	8,256,044	7,498,838	(1,843)	36,791,631	37,546,994	0	35,103,721

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ .....4,988,766 ; NAIC 2 \$ .....0 ;  
NAIC 3 \$ .....0 ; NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

SCHEDULE DA - PART 1  
Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	4,988,766	XXX	4,956,260	44,000	0

SCHEDULE DA - VERIFICATION  
Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	13,456,372	10,795,607
2. Cost of short-term investments acquired .....	0	15,856,034
3. Accrual of discount .....	31,233	34,037
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals .....	1,162	0
6. Deduct consideration received on disposals .....	8,500,000	13,209,000
7. Deduct amortization of premium.....	0	20,306
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other-than-temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	4,988,767	13,456,372
11. Deduct total nonadmitted amounts.....		0
12. Statement value at end of current period (Line 10 minus Line 11)	4,988,767	13,456,372

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION  
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	16,177,172	0
2. Cost of cash equivalents acquired .....	101,000,000	16,177,172
3. Accrual of discount .....		0
4. Unrealized valuation increase (decrease) .....		0
5. Total gain (loss) on disposals.....	225,372	0
6. Deduct consideration received on disposals .....	91,000,000	0
7. Deduct amortization of premium .....		0
8. Total foreign exchange change in book/adjusted carrying value .....		0
9. Deduct current year's other than temporary impairment recognized .....		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	26,402,544	16,177,172
11. Deduct total nonadmitted amounts .....		0
12. Statement value at end of current period (Line 10 minus Line 11)	26,402,544	16,177,172



Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

## E04

## E04

E04

E04

E04

**STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC**

## SCHEDULE D - PART 4

**Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter**

[illegible]

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

# STATEMENT AS OF JUNE 30, 2019 OF THE Upper Peninsula Health Plan, LLC

## SCHEDULE E - PART 1 - CASH

[illegible]

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]